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APPLICANTS

Michael R. Farzan, Cambridge, MA;
Tatyana K. Dorfman, Needham, MA;

**** CONTINUING DATA *******

This appln claims benefit of 60/445,853 02/10/2003

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

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**** SMALL ENTITY ****

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 1	TOTAL CLAIMS 39	INDEPENDENT CLAIMS 8
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>				

ADDRESS

Michael A. Sanzo
Fitch, Even, Tabin & Flannery
1801 K Street, N.W., Suite 401L
Washington, DC20006-1201

TITLE

Peptides binding gp120 of HIV-1

FILING FEE RECEIVED 1215	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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